PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

40 R 9 200 15074

CLAIMS AS FILED - PART I (Column 1) (Column 2)								SMALL ENTITY TYPE			OTHER THAN OR SMALL ENTITY	
TOTAL CLAIMS			12				Γ	RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA		В	ASIC FEE	370.00	OR	BASIC FEE	740.00
TOTAL CHARGEABLE CLAIMS			12 minus 20=		*			X\$ 9=		OR	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 =		* 7			X42=		OR	X84=	84
MULTIPLE DEPENDENT CLAIM P			RESENT				r	+140=		OR	+280=	-
* If the difference in column 1 is less than zero, e					r "0" in c	olumn 2	<u> </u>	TOTAL		OR	TOTAL	
CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)							•	SMALL ENTITY OR			OTHER THAN SMALL ENTITY	
AMENDMENT A	20 (20) 200 (10) 200 (10) 200 (10) 200 (10)	CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST IBER OUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***	TOL 4114	=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF MI	ULTIPLE DEF	ENDEN	CLAIM		\	+140=		OR	+280=	
							L	TOTAL		ا	TOTAL ADDIT. FEE	~
(Column 1) (Column 2) (Column 3)											, .voi i. (°CC)	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER NOUSLY FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	* NTATION OF MU	Minus	***	T CL AINA	=		X42=		OR	X84=	
<u> </u>	I INST PRESE	TATION OF MI	OLINFLE DEF	ENDEN	1 CLAIIVI		, [+140=		OR	+280=	
							AC	TOTAL DDIT. FEE		OR	TOTAL ADDIT. FEE	
(Column 1) (Column 2) (Column 3)												
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		NUM PREVI	HEST MBER IOUSLY D FOR	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		=		X42=		OR	X84=	
	FIRST PRESE	NTATION OF M	ULTIPLE DEI	PENDEN	T CLAIM		1 -					
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.										OR	+280= TOTAL	
**	** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.											